	espond to a collection of information unless it displays a valid OMB control number							
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known				
FEE TRANSMITTAL				Application Number 10/521,566				
				Filing Date		January 18, 2005		
For FY 2009				First Named Inventor William Ho				
Applicant claims small entity status. See 37 CFR 1.27				Examiner Name		J. HORNING		
				Art Unit 1792				
TOTAL AMOUNT OF PAYN	Attorney Docket	No.	0104-0499PUS1					
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify):								
Deposit Account Deposit Account Number: 02-2448 Deposit Account Name:								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayments of fee(s)								
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card								
information and authorization on PTO-2038.								
FEE CALCULATION								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
•	FILING	FEES		CH FEES	EXA	MINATION		
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee	Small (\$) Fee		Fees Paid (\$)
Utility	330	165	540	270	220			0.00
Design	220	110	100	50	140			0.00
Plant	220	110	330	165	170	•		0.00
Reissue	330	165	540	270	650	•		0.00
Provisional	220	110	0	0			0	0.00
2. EXCESS CLAIM FEES Small Entity								
Fee Description Fee (\$)								
Each claim over 20 (including Reissues) 52 26								
Each independent claim over 3 (including Reissues)							220	110
Multiple dependent cl	D-14 (6)			390	195			
Total Claims Extra Claims Fee (\$) Fee 37 - 20 or HP = 0 x =				<u>Paid (\$)</u> 0.00			Multiple Dependent Claims Fee (\$) Fee Paid (\$)	
HP = highest number of total				0.00			ee (\$)	0.00
	Extra Clai		<u>Fee</u>	Paid (\$)				0.00
2 - 3 or HP = _	0	x		0.00				
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer								
listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
<u>Total Sheets</u> <u>Extra Sheets</u> <u>Number of each additional 50 or fraction thereof</u> <u>Fee (\$)</u> <u>Fee Paid (\$)</u>								
100 =0 /50 =0 (round up to a whole number) x =0.00								
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)								
0.00								
Other (e.g., rate filing	surcharge	. r cutoff for Exte	JI IOIOI I UI	rane				130.00
SUBMITTED BY								
Registration No. 43368 Telephone 703-205-8000 (Attorney/Agent)								
Name (Print/Type) Paul C. Lewis Date November 27, 2009								

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.